



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

June 19, 2012

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These Updates, published by the Executive Office of Health and Human Services (EOHHS) in consultation with the other state agencies involved in ACA implementation, will bring you news related to the implementation of provisions of the ACA here in Massachusetts.

Grants and Demonstrations

The ACA provides funding opportunities to transform how health care is delivered, expand access to care and support healthcare workforce training.

Grant and Demonstration Announcements

Integrative Medicine Program (IMP), \$5206. Announced June 15, 2012. Funding is available to support strategies that integrate evidence-based preventive medicine education into preventive medicine residency programs. Eligible applicants include accredited graduate preventive medicine programs in accredited schools of public health or medicine; accredited nonprofit hospitals; state, local or tribal health departments; or consortia of the above. Awardees will also use the funding for faculty development and for the facilitation of information to the trainees. \$2.5M in 16 awards is available.

Applications are due July 15, 2012.

The announcement can be viewed at: [HRSA](#)

National Coordinating Center for Integrative Medicine, \$5206. Announced June 15, 2012. Funding is available to establish a National coordinating center for Integrative Medicine (NccIM) for the Integrative Medicine Program (IMP). Eligible applicants include health professions schools, academic health centers, state or local governments, or certain nonprofit entities. The NccIM will provide technical support to IMP grantees, which includes faculty development and trainee support. In addition, the NccIM will collect data, evaluate the IMP, and distribute information on best practices and lessons learned from IMP awardees. One \$800k award is available.

Applications are due July 16, 2012.

The announcement can be viewed at: [HRSA](#)

Advance Payment Accountable Care Organizations (ACO) Model, §3021. Updated June 11, 2012. Beginning August 1, 2012 CMS will accept applications for an additional round of Advance Payment ACOs that will begin operating on January 1, 2013. This model will test whether paying a portion of future shared savings will increase participation of physician-owned and rural ACOs in the Medicare Shared Savings Program, and whether advance payments will allow teams of providers to improve care for beneficiaries and generate Medicare savings more quickly. The advanced payments would be recovered from any future shared savings achieved by the ACO. A Notice of Intent to Apply letter is due June 29, 2012 and applications are due September 19, 2012.

Additional information is available on the Innovation website at:

<http://www.innovations.cms.gov/initiatives/ACO/Advance-Payment/index.html>

Elder Abuse Prevention Interventions Program, §2042 and §4002. Announced June 14, 2012. Funding is available to test, measure and implement new approaches for the prevention of elder abuse, neglect and exploitation. States are eligible to apply. Two types of projects will be funded through this announcement. Applicants choosing the first option will pilot test interventions for elderly populations at risk of abuse, neglect or exploitation. The second option will study elder abuse in Indian Country. Applicants will identify, develop and disseminate culturally appropriate materials to Tribal professionals on elder abuse. In addition, applicants will develop effective collaborations between tribal and non-tribal entities for suspected cases of abuse, neglect or exploitation. \$5.05M in 8 awards is available. Applications are due July 31, 2012.

The announcement can be viewed at: [Grants.gov](#)

News

6/15/12 The Medicaid and CHIP Payment and Access Commission (MACPAC) released its June 2012 Report to the Congress on Medicaid and CHIP. The report examines the role of Medicaid and CHIP as purchasers of health care services and highlights the importance of access measures as a tool for monitoring and improving program performance for program beneficiaries. The report looked at Medicare-Medicaid coordination, access to care for non-elderly adults and data for measuring access and Medicaid and CHIP statistics.

MACPAC was established by the Children's Health Insurance Program Reauthorization Act and later expanded and funded through §2801 and §10607 of the ACA. The commission consists of experts, government officials, executives and medical professionals. MACPAC is tasked with reviewing state and federal Medicaid and CHIP access and payment policies and making recommendations to Congress, the HHS Secretary, and the states on a wide range of issues affecting Medicaid and CHIP populations, including health care reform.

Read the report at: [Docs](#)

Learn more about MACPAC at: <http://www.macpac.gov/home>

6/15/12 CMS announced the second (final) batch of organizations to receive Health Care Innovation Awards under §3021 of the ACA. The 81 new awards are designed to test new models that deliver high quality medical care, enhance the health care workforce and lower costs through improved care to Medicare, Medicaid and Children's Health Insurance

Program (CHIP) enrollees, particularly those with the highest health care needs. Combined with the awards announced last month, HHS has awarded a total of 107 projects that, according to awardees, are designed to save the health care system an estimated \$1.9 billion over the next three years. Awards range from approximately \$1 million to \$30 million for a three-year period.

12 projects in Massachusetts received funding.

Read their profiles at: <http://innovations.cms.gov/initiatives/Innovation-Awards/massachusetts.html>

In May the Innovation Center announced funding for 26 projects, of which 3 were connected to Massachusetts.

Read their profiles at: <http://innovations.cms.gov/Files/x/HCIA-Project-Profiles.pdf>

6/13/12 Surgeon General Regina Benjamin, the Chair of The National Prevention Council, announced the release of its National Prevention Council Action Plan, which seeks to promote wellness. The Action Plan represents the next step in the implementation of the National Prevention Strategy to tackle issues such as obesity, tobacco use, health disparities and chronic disease.

The National Prevention Strategy was released in June 2011 by the National Prevention Council, an organization of 17 federal departments and agencies that was established in June 2010, as required by ACA §4001. The Council's role is to help move the nation's health care focus from chronic illness and disease to prevention and wellness. The action plan includes first-time commitments from all of the 17 federal departments and agencies on the Council to increase tobacco free environments and access to healthy, affordable foods and to identify additional opportunities to consider prevention and health by their agencies.

Learn more about the National Prevention, Health Promotion and Public Health Council at: <http://www.healthcare.gov/prevention/nphpphc/index.html>

Read the National Prevention Strategy at:

<http://www.healthcare.gov/prevention/nphpphc/strategy/report.pdf>

Read the National Prevention Council Action Plan at:

<http://www.healthcare.gov/prevention/nphpphc/2012-npc-action-plan.pdf>

6/12/12 The U.S. Preventive Services Task Force (USPSTF) is recommending screening and intervention services for women of childbearing age who are the victims of domestic violence. The USPSTF is an independent panel of non-federal government experts that conduct reviews of scientific evidence of preventive health care services. The USPSTF then develops and publishes recommendations for primary care clinicians and health systems in the form of recommendation statements. As part of their recommendations process, the USPSTF will assign definitions to the services they review based on the certainty that a patient will receive a substantial benefit from receiving the benefit. Services that are graded "A" and "B" are highly recommended and the USPSTF believes there is a high certainty that patient will receive a substantial or moderate benefit.

Under §1001 of the ACA, all of the recommended services receiving grades of "A" or "B" must be provided without cost-sharing when delivered by an in-network health insurance provider in the plan years (or, in the individual market, policy years) that begin on or after September 23, 2010. The USPSTF has assigned a "B" rating for the domestic violence screening and intervention recommendation.

Comments are due July 10, 2012.

Learn more about the USPSTF and the ACA at:

<http://www.healthcare.gov/law/resources/regulations/prevention/taskforce.html>

Learn more about this USPSTF recommendation and how to comment on them at:

<http://www.uspreventiveservicestaskforce.org/draftrec2.htm>

6/11/2012 CMS announced that 14.3 million people with original Medicare received at least one **new free preventive service during the first five months of 2012 under \$4103 and \$4104 of the ACA**. Included in these numbers are 1.1 million beneficiaries who received an Annual Wellness Visit. Covered services include cancer screenings, mammograms and flu shots. In 2011, 32.5 million Medicare beneficiaries received at least one free preventive service.

Read the press release at: [CMS](#)

Read more about Medicare Preventive Services at: <http://www.healthcare.gov/law/features/65-older/medicare-preventive-services/index.html>

Upcoming Events

3 R's Work Group Open Stakeholder Meeting

Session to Discuss ACA Provisions Related to Reinsurance, Risk Adjustment and Risk Corridors

Friday, June 22, 2012

10:00 AM - 11:30 AM

1000 Washington Street, Boston

Hearing Room E, DOI Offices

If any interested persons are unable to attend the meeting in person, they can participate in the session by calling the number below. We highly encourage people to attend in person as the acoustics in the Hearing Room can be difficult.

Dialing Instructions:

Dial 1-877-820-7831

Pass Code 371767# (please make sure to press # after the number).

Bookmark the **Massachusetts National Health Care Reform website**

at: <http://mass.gov/national health reform> to read updates on ACA implementation in Massachusetts.

Remember to check <http://mass.gov/masshealth/duals> for information on the **"Integrating Medicare and Medicaid for Dual Eligible Individuals"** initiative.